Schedule E)		PAGE 1 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
		M M / D D / Y Y Y Y
Check if 24-hour report X 48-hour report New re	eport Amends report fil	
Full Name of Payee Staples		Date of Public Distribution/Dissemination
<u>'</u>		09 / 09 / 2015
Mailing Address US Route 1		Amount
City State	Zip Code	32.66
Alexandria	22314-0000	Transaction ID : EEB074DA57EE343B486D Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Postage	Category/ Type	09 17 2015
Name of Federal Candidate	Support Off	fice Sought: House District:
Marlin Stutzman	Oppose	President State: IN
Calendar Year-To-Date Per Election for Office Sought	45267.47 Dis 20°	sbursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		09 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388		Amount
City State	Zip Code	44.50
Alexandria	22313-0388	Transaction ID : EE033A0234BC04A0A94E Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing	Category/ Type	09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Of	fice Sought: House District:
Marlin Stutzman	Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·····	77.16
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.	•	
	onically Filed] Date	12 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	_	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼		
Senate Conservatives Fund		
	C C00448696	
Check if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y	
Full Name of Payee	Date of Public Distribution/Dissemination	
Senate Conservatives Fund	M M / D D / Y Y Y Y	
Mailing Address PO Box 388	09 19 2015	
1 0 Box coo	Amount	
City State Zip Code	4.75	
Alexandria VA 22313-0388	Transaction ID : EEE49FFF459D7476398D Date of Disbursement or Obligation	
Purpose of Expenditure IE-Stutzman-Donation Processing Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support Office	Sought: House District:	
Marlin Stutzman Oppose	President Senate State: IN	
Calendar Year-To-Date Per Election for Office Sought Disbut 45316.72 Disbut 2016	rsement For: X Primary General	
	Other (specify)	
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination	
	09 26 2015	
Mailing Address PO Box 388	Amount	
City State Zip Code	283.25	
Alexandria VA 22313-0388	Transaction ID: E49EE07CB86F24B9A9DA Date of Disbursement or Obligation	
Purpose of Expenditure IE-Stutzman-Donation Processing Category/ Type	09 / 26 / 2015	
Name of Federal Candidate Support Office	e Sought: House District:	
Marlin Stutzman Oppose	President X Senate State: IN	
Calendar Year-To-Date Per Election for Office Sought Disbut 2016		
1 S. 2.000.01 (a. 0.1100 000g.11	Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures	288.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.		
Paul Kilgore [Electronically Filed] Date 1.	2 01 2015	
Signature		

Schedule E)		PAGE 3 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
Check if 24-hour report X 48-hour report New report	Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388		Amount
City State Zip	Code	594.70
Alexandria VA 22	2313-0388	Transaction ID : E91818EA4FF804AC6A0E Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing	Category/ Type	09 30 / 2015
Name of Federal Candidate	Support Office	Sought: House District:
Marlin Stutzman	Oppose	President State: IN
Calendar Year-To-Date Per Election for Office Sought 461	194.67 Disbu 2016	rrsement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		10 03 / 2015
Mailing Address PO Box 388		Amount
City State Zip	p Code	36.75
	2313-0388	Transaction ID: E38875560033F4BEFAB7 Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing	Category/ Type	10 03 / 2015
Name of Federal Candidate	Support Office	e Sought: House District:
Marlin Stutzman	Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought	46231.42 Disbu 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		631.45
(-)		7
(b) SUBTOTAL of Unitemized Independent Expenditures	•	7 7 7
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures repwith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
Paul Kilgore [Electronical	lly Filed] Date 1	2 01 2015
Signature	_	

Schedule E)	PAGE 4 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
Check if 24-hour report X 48-hour report New report Amends	report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	Amount
City State Zip Code	3.50
Alexandria VA 22313-0388	Transaction ID : EE0DE73E9104F41B2B3E Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing Category/ Type	10 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Suppo	ort Office Sought: House District:
Marlin Stutzman Oppos	
Calendar Year-To-Date Per Election for Office Sought 46234.92	Disbursement For: X Primary General 2016 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	Amount
City State Zip Code	9.00
Alexandria VA 22313-0388	Transaction ID : E2C65910510154985B4C Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing Category/ Type	10 / 17 / Y Y Y Y Y Y Y
Name of Federal Candidate Supp	ort Office Sought: House District:
Marlin Stutzman Oppo	se President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 46243.92	Disbursement For: X Primary General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	
(a) CODICIAL OF ROMEON MASSING EXPONDING	12.50
(b) SUBTOTAL of Unitemized Independent Expenditures	·······)
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or agparty committee) any political party committee or its agent.	
Paul Kilgore [Electronically Filed]	Date 12 01 2015
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	AI ENDITORIES	PAGE 5 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
Check if 24-hour report X 48-hour report	New report Amends report file	ed on
Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination
Mailing Address PO Box 388		10 24 2015 Amount
City Sta	te Zip Code	287.25
Alexandria V	•	Transaction ID : E6EF5C681697148EEADD Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing	Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	ice Sought: House District:
Marlin Stutzman	Oppose	President State: IN
Calendar Year-To-Date Per Election for Office Sought	46531.17 Dis	bursement For:
Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination
Mailing Address PO Box 388		10 31 2015 Amount
City Sta	ate Zip Code	4.75
Alexandria V.	A 22313-0388	Transaction ID : E914B6B4B5720435489D Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	X Support Off	ice Sought: House District:
Marlin Stutzman	Oppose	President X Senate State: IN
Calendar Year-To-Date Per Election for Office Sought	46535.92 Dis 20	bursement For: X Primary General Other (specify) Other
(a) SUBTOTAL of Itemized Independent Expenditures		292.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate or party committee) any political party committee or its agen	authorized committee or agent of eith	
Paul Kilgore	[Electronically Filed] Date	12 01 2015
Signature	_	

Schedule E)	PAGE 6 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
Check if 24-hour report X 48-hour report New report Amends report	ort filed on
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
Mailing Address PO Box 388	11 07 2015 Amount
	2000
City State Zip Code Alexandria VA 22313-0388	30.00 Transaction ID: E7528E1A3B12640759AC Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing Category/ Type	11 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
Marlin Stutzman Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 46565.92	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	11 / 14 / 2015
Mailing Address PO Box 388	Amount
City State Zip Code	20.00
Alexandria VA 22313-0388	Transaction ID : EEB2365DD2794470285C Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing Category/ Type	11 / 14 / 2015
Name of Federal Candidate Support	Office Sought: House District:
Marlin Stutzman Oppose	President State: IN
Calendar Year-To-Date Per Election for Office Sought 46585.92	Disbursement For:
•	
(a) SUBTOTAL of Itemized Independent Expenditures	> 50.00
(b) SUBTOTAL of Unitemized Independent Expenditures	. •
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent committee) any political party committee or its agent.	
Paul Kilgore [Electronically Filed] Date	e 12 01 2015
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	LXI ENDITORIES	PAGE 7 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
Check if 24-hour report X 48-hour report	X New report Amends repor	t filed on Mam / Dab / Yayayay
Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination
Mailing Address PO Box 388		11 21 2015 Amount
City S	tate Zip Code	60.25
•	VA 22313-0388	Transaction ID : E9B5EAD0FFC1E4350B68 Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Donation Processing	Category/ Type	11 21 2015
Name of Federal Candidate	Support	Office Sought: House District:
Marlin Stutzman	Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought	46646.17	Disbursement For:
Full Name of Payee U.S. Postal Service		Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 475 Lenfant Plz SW		Amount
City	tate Zip Code	327.90
	DC 20260-0004	Transaction ID: E3F5C6486C6C346D38F3 Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Postage	Category/ Type	11 / 24 / Y Y Y Y Y
Name of Federal Candidate	X Support	Office Sought: House District:
Marlin Stutzman	Oppose	President X Senate State:IN
Calendar Year-To-Date Per Election for Office Sought	47111.74	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		388.15
(b) SUBTOTAL of Unitemized Independent Expenditure	s	>
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its age	or authorized committee or agent of	
Paul Kilgore	[Electronically Filed] Date	12 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

Schedule E)	TIES	PAGE 8 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
Check if 24-hour report X 48-hour report New report	Amends report filed or	M = M / D = D / Y = Y = Y
Full Name of Payee	Г	Date of Public Distribution/Dissemination
Staples		11 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address US Route 1	A	mount
City State Zip	Code	137.67
		ransaction ID : EC8A3A918E2D745F6A06 Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Printing Ca	ategory/ Type	11 24 7 2015
Name of Federal Candidate	Support Office S	ought: House District:
Marlin Stutzman	Oppose Pr	resident Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 471	Disburse 2016	ement For:
Full Name of Payee	1	Date of Public Distribution/Dissemination
Envision Printers/Marketing Mailing Address 2 Riverhend Pkwy		11 30 / Y Y Y Y Y
Mailing Address 2 Riverbend Pkwy	ļ.	Amount
City State Zip	Code	13931.79
		ansaction ID : EDDB15F18D3EF40FD9D(Date of Disbursement or Obligation
Purpose of Expenditure IE-Stutzman-Direct Mail Production Ca	ategory/ Type	12
Name of Federal Candidate	X Support Office S	lought: House District:
Marlin Stutzman		resident Senate State: IN
Calendar Year-To-Date Per Election for Office Sought	61052.53 Disburse 2016	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures		14069.46
		7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	7 7
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reposition, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
Paul Kilgore [Electronically	y Filed] Date 12	/ 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

Schedule E)	PAGE 9 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
Mailing Address PO Box 388	11 30 2015
	Amount
City State Zip Code	9.00
Alexandria VA 22313-0388 Purpose of Expenditure	Transaction ID : E1E599947C8134404AB0 Date of Disbursement or Obligation
IE-Stutzman-Donation Processing Category/ Type	11 30 / 2015
Name of Federal Candidate Support Office	e Sought: House District:
Marlin Stutzman Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y = Y
	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Other (specify) ► General
(a) SUBTOTAL of Itemized Independent Expenditures	9.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	15817.72
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
[Electronically Filed] Date 1	2 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	